| DMV Technician: Chais Waines Position                             | tion:Oor 2 |           |   |
|---|------------|-----------|---|
| Station: POVER DAV LANE 4 Date: 4/27/12 Time                      | 1316       | 7         |   |
| Vehicle Make: Chavy Model Courtz                                  | Year       | 199       | 3                                       |
| GVWR: Fuel Type: G Registration N                                 | umber:     | RE        | D                                       |
| Auditor: Dossett  |            |           |   |
|   |            | ı         | ı <del></del>                           |
|   | YES        | NO        | N/A                                     |
| 1. Did technician check vehicle paper work and verify VIN number? | W          |           |   |
| 2. Was Emissions testing required?                                | سن ا       |           |   |
| a) Was Emissions testing performed using OBD?                     |            | <b></b>   |   |
| b) Was Emissions testing performed using Analyzer Probe?          | اسا        |           |   |
| c) Was Emissions testing performed using Paddle(s)?               | <u></u>    |           |   |
| d) Was Emissions testing performed using Clip?                    |            | سسنا      |   |
| 3. Was Catalytic Converter inspection required?                   | <u></u>    |           |   |
| a) Was Catalytic Converter inspection performed?                  | 1          |           |   |
| 4. Was Fuel Tank pressure testing required?                       | l lum      |           |   |
| a) Was Fuel Tank pressure testing performed?                      |            |           |   |
| 5. Was Fuel Cap pressure testing required?                        | <i>''</i>  |           |   |
| a) Was Fuel Cap pressure testing performed?                       |            | <u> </u>  |   |
| 6. Is this test a <b>Re-check</b> from a prior failure?           | ļ          | سيا       |   |
| a) Which re-check test is being performed? 1 2 3 (circle one)     |            | سا        |   |
| b) Was repair paperwork verified for waiver?                      |            | <u>i~</u> |   |
| 7. Was Two-Speed Idle testing required?                           | 1          |           |   |
| a) Was Two-Speed Idle testing performed?                          |            |           |   |
| 8. Was Curb Idle testing required?                                | -          | <u> </u>  |   |
| a) Was Curb Idle testing performed?                               |            |           | <u></u>                                 |
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| Comments:   |            |           |   |
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| DMV Technician: Dave Tombe Positio                                | Position: 1 or 2 |     |             |  |
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| 30.0 / 31/2130 / 1  |                  |     |             |  |
| Vehicle Make: (NUY Model CONSTRE                                  | Year             | 19  | 73          |  |
| GVWR: Fuel Type: 6 Registration N                                 |                  |     | <del></del> |  |
| Auditor: Dosserv  |                  |     |             |  |
|   |                  | ··· |             |  |
|   | YES              | NO  | N/A         |  |
| 1. Did technician check vehicle paper work and verify VIN number? | ~                |     |             |  |
| 2. Was Emissions testing required?                                |                  | سسا |             |  |
| a) Was Emissions testing performed using OBD?                     |                  |     | ب           |  |
| b) Was Emissions testing performed using Analyzer Probe?          |                  |     | سسب         |  |
| c) Was Emissions testing performed using Paddle(s)?               |                  |     | <u> </u>    |  |
| d) Was Emissions testing performed using Clip?                    |                  |     | سسنه        |  |
| 3. Was Catalytic Converter inspection required?                   |                  | سسا |             |  |
| a) Was Catalytic Converter inspection performed?                  |                  |     | س           |  |
| 4. Was Fuel Tank pressure testing required?                       | V                | 1   |             |  |
| a) Was Fuel Tank pressure testing performed?                      |                  |     | سا          |  |
| 5. Was Fuel Cap pressure testing required?                        | W                |     |             |  |
| a) Was Fuel Cap pressure testing performed?                       | <u></u>          |     |             |  |
| 6. Is this test a <b>Re-check</b> from a prior failure?           |                  |     |             |  |
| a) Which re-check test is being performed? 1 2 3 (circle one)     |                  |     | سي          |  |
| b) Was repair paperwork verified for waiver?                      |                  |     | سسا         |  |
| 7. Was Two-Speed Idle testing required?                           |                  | ~   |             |  |
| a) Was Two-Speed Idle testing performed?                          |                  |     | سما         |  |
| 8. Was Curb Idle testing required?                                |                  | سن  |             |  |
| a) Was Curb Idle testing performed?                               |                  |     | س           |  |
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| Comments:   |                  |     |             |  |
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| DMV Technician: 1 cm Deas Positio                                 | tion: 1 or 2 |             |       |
|---|--------------|-------------|-------|
| Station: Dorn Lawes Laws / Date: 4/27/12 Time:                    | 1300         |             |       |
| Vehicle Make: @401L4L Model SLS                                   | Year .       |             |       |
| GVWR: Fuel Type: $G$ Registration N                               | umber        | XC5         | 58824 |
| Auditor: Dossell  |              |             |       |
|   |              |             | ·     |
|   | YES          | NO          | N/A   |
| 1. Did technician check vehicle paper work and verify VIN number? | <u> </u>     |             |       |
| 2. Was Emissions testing required?                                | 1            |             |       |
| a) Was Emissions testing performed using OBD?                     | V            |             |       |
| b) Was Emissions testing performed using Analyzer Probe?          |              | ~           |       |
| c) Was Emissions testing performed using Paddle(s)?               |              | <i>i</i> ⁄  |       |
| d) Was Emissions testing performed using Clip?                    |              | ~           |       |
| 3. Was Catalytic Converter inspection required?                   |              | i           |       |
| a) Was Catalytic Converter inspection performed?                  |              |             | سا    |
| 4. Was Fuel Tank pressure testing required?                       |              | •           | a an  |
| a) Was Fuel Tank pressure testing performed?                      |              |             | سسه   |
| 5. Was Fuel Cap pressure testing required?                        |              | 2           |       |
| a) Was Fuel Cap pressure testing performed?                       | _            |             | 2     |
| 6. Is this test a <b>Re-check</b> from a prior failure?           |              |             |       |
| a) Which re-check test is being performed? 1 2(3/(circle one)     | <i>'</i>     |             |       |
| b) Was repair paperwork verified for waiver?                      |              |             |       |
| 7. Was <b>Two-Speed Idle</b> testing required?                    |              | <b>'</b>    |       |
| a) Was Two-Speed Idle testing performed?                          |              |             | ·/    |
| 8. Was Curb Idle testing required?                                |              | <u>س</u>    |       |
| a) Was Curb Idle testing performed?                               |              |             |       |
|   |              |             |       |
| Comments:   |              |             |       |
| OBD REARST  |              |             |       |
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| DMV Technician: Steve Agron , Position                            | tion:(1 or 2 |          |      |
|---|--------------|----------|------|
| Station: DOVER LANZ 4 Date: 6/27/12 Time                          | 125          | 0        |      |
| Vehicle Make: Cappaire Model Escal 402                            | Year         |          |      |
| GVWR: 7200 Fuel Type: G Registration N                            | umber:       | DU       | 104  |
| Auditor:  |              |          |      |
|   |              |          |      |
|   | YES          | NO       | N/A  |
| 1. Did technician check vehicle paper work and verify VIN number? | 2            |          |      |
| 2. Was Emissions testing required?                                | سرا          |          |      |
| a) Was Emissions testing performed using OBD?                     | سنا          |          |      |
| b) Was Emissions testing performed using Analyzer Probe?          |              | سين      |      |
| c) Was Emissions testing performed using Paddle(s)?               |              |          |      |
| d) Was Emissions testing performed using Clip?                    |              | 4        |      |
| 3. Was Catalytic Converter inspection required?                   |              | <i></i>  |      |
| a) Was Catalytic Converter inspection performed?                  |              |          | سا   |
| 4. Was Fuel Tank pressure testing required?                       |              | 1        |      |
| a) Was Fuel Tank pressure testing performed?                      |              |          |      |
| 5. Was Fuel Cap pressure testing required?                        |              |          |      |
| a) Was Fuel Cap pressure testing performed?                       |              |          | سن   |
| 6. Is this test a Re-check from a prior failure?                  |              | 1/       |      |
| a) Which re-check test is being performed? 1 2 3 (circle one)     |              |          | سسنا |
| b) Was repair paperwork verified for waiver?                      |              |          | سسا  |
| 7. Was Two-Speed Idle testing required?                           |              | سيا      |      |
| a) Was Two-Speed Idle testing performed?                          |              |          | سيا  |
| 8. Was Curb Idle testing required?                                |              | <i>\</i> |      |
| a) Was Curb Idle testing performed?                               |              |          | سيا  |
|   |              |          |      |
| Comments:   |              |          |      |
| OBD TESTING   |              |          |      |
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| DMV Technician: Bob /for12 , Position: (1) or 2                   |              |             |         |
|---|--------------|-------------|---------|
| Station: Doven DMV LANE 3 Date: 4/27/12 Time: 1245                |              |             |         |
| Vehicle Make: Nova Model Accord                                   | Year         |             |         |
| GVWR: Fuel Type: G Registration N                                 | umber        | RUE         | BART    |
| Auditor: Dossert  |              |             |         |
|   | ·            | <del></del> |         |
|   | YES          | NO          | N/A     |
| 1. Did technician check vehicle paper work and verify VIN number? | · ·          |             |         |
| 2. Was Emissions testing required?                                | /            |             |         |
| a) Was Emissions testing performed using OBD?                     | <i>'</i>     |             |         |
| b) Was Emissions testing performed using Analyzer Probe?          |              | 1/          |         |
| c) Was Emissions testing performed using Paddle(s)?               |              |             |         |
| d) Was Emissions testing performed using Clip?                    | <u> </u>     | 1           |         |
| 3. Was Catalytic Converter inspection required?                   |              | <u></u>     |         |
| a) Was Catalytic Converter inspection performed?                  |              | سرا         |         |
| 4. Was Fuel Tank pressure testing required?                       |              |             |         |
| a) Was Fuel Tank pressure testing performed?                      |              |             |         |
| 5. Was Fuel Cap pressure testing required?                        |              | <b>V</b>    |         |
| a) Was Fuel Cap pressure testing performed?                       |              | <b>1</b>    |         |
| 6. Is this test a <b>Re-check</b> from a prior failure?           |              | V           |         |
| a) Which re-check test is being performed? 1 2 3 (circle one)     |              |             |         |
| b) Was repair paperwork verified for waiver?                      |              |             |         |
| 7. Was Two-Speed Idle testing required?                           |              | V           |         |
| a) Was Two-Speed Idle testing performed?                          |              |             | ·       |
| 8. Was Curb Idle testing required?                                |              | /           |         |
| a) Was Curb Idle testing performed?                               |              |             | <b></b> |
|   |              |             |         |
| Comments:   |              |             |         |
| OSD testing   |              |             |         |
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| DMV Technician: Teo Kisenz Positio                                | Position (1) or 2 |            |         |
|---|-------------------|------------|---------|
| Station: DOVER DMV Date: 6 Time                                   | Time: /240        |            |         |
| Vehicle Make: NISSAN Model ALTIMA                                 | Year 2005         |            |         |
| GVWR: Fuel Type: G Registration N                                 | lumber:           | 220        | 925     |
| Auditor: Dosser   |                   | 77777      |         |
|   |                   | ····       | <b></b> |
|   | YES_              | NO         | N/A     |
| 1. Did technician check vehicle paper work and verify VIN number? | <i></i>           | ~~~        |         |
| 2. Was Emissions testing required?                                | /                 |            |         |
| a) Was Emissions testing performed using OBD?                     | 1                 |            |         |
| b) Was Emissions testing performed using Analyzer Probe?          |                   |            | ·       |
| c) Was Emissions testing performed using Paddle(s)?               |                   |            | سن      |
| d) Was Emissions testing performed using Clip?                    |                   |            | 1       |
| 3. Was Catalytic Converter inspection required?                   |                   | \ <u></u>  |         |
| a) Was Catalytic Converter inspection performed?                  |                   | 1/         |         |
| 4. Was Fuel Tank pressure testing required?                       |                   | <b>i</b> / |         |
| a) Was Fuel Tank pressure testing performed?                      |                   |            |         |
| 5. Was Fuel Cap pressure testing required?                        |                   | /          |         |
| a) Was Fuel Cap pressure testing performed?                       |                   | <i>`</i>   |         |
| 6. Is this test a Re-check from a prior failure?                  | <b>/</b>          |            |         |
| a) Which re-check test is being performed? 1 2/3 (circle one)     |                   |            |         |
| b) Was repair paperwork verified for waiver?                      |                   | <b>'</b>   |         |
| 7. Was Two-Speed Idle testing required?                           |                   | ·/         |         |
| a) Was Two-Speed Idle testing performed?                          |                   | <b></b>    |         |
| 8. Was Curb Idle testing required?                                |                   | ン          |         |
| a) Was Curb Idle testing performed?                               |                   | /          |         |
|   | _                 |            |         |
| Comments:   |                   |            |         |
| RECHECK SAFERY & LAM  |                   |            |         |
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